

MAINE STATE LEGISLATURE

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STATE OF MAINE
126TH LEGISLATURE
FIRST REGULAR SESSION



Summaries of bills, adopted amendments and laws enacted or finally passed

**JOINT STANDING COMMITTEE ON HEALTH AND HUMAN
SERVICES**

July 2013

STAFF:

JANE ORBETON, SENIOR ANALYST
ANNA BROOME, LEGISLATIVE ANALYST
OFFICE OF POLICY AND LEGAL ANALYSIS
13 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1670
&
CHRISTOPHER NOLAN
OFFICE OF FISCAL AND PROGRAM REVIEW
5 STATE HOUSE STATION
AUGUSTA, ME 04333
(207) 287-1635

MEMBERS:

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*Rep. Jane P. Pringle temporarily appointed for the duration of the absence of Rep. Matthew Peterson on the Health and Human Services Committee

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126TH LEGISLATURE

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LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contains summaries of all LDs and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 126th Maine Legislature.

The *Digest* is arranged alphabetically by committee and within each committee by Legislative Document (LD) number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each LD title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. The appendices include a summary of relevant session statistics, an index of all bills by LD number and an index of enacted laws by law type and chapter number.

Final action on each LD is noted to the right of the LD title. The following describes the various final actions.

CARRIED OVER carried over to a subsequent session of the Legislature
CON RES XXX..... chapter # of constitutional resolution passed by both houses
CONF CMTE UNABLE TO AGREE.....Committee of Conference unable to agree; legislation died
DIED BETWEEN HOUSES.....House & Senate disagreed; legislation died
DIED IN CONCURRENCE.....defeated in each house, but on different motions; legislation died
DIED ON ADJOURNMENT..... action incomplete when session ended; legislation died
EMERGENCY..... enacted law takes effect sooner than 90 days after session adjournment
FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE emergency failed to receive required 2/3 vote
FAILED, ENACTMENT or FINAL PASSAGE..... failed to receive final majority vote
FAILED, MANDATE ENACTMENT legislation proposing local mandate failed required 2/3 vote
HELD BY GOVERNOR..... Governor has not signed; final disposition to be determined at subsequent session
LEAVE TO WITHDRAW..... sponsor's request to withdraw legislation granted
NOT PROPERLY BEFORE THE BODY ruled out of order by the presiding officer; legislation died
INDEF PP..... indefinitely postponed; legislation died
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X... ought-not-to-pass report accepted; legislation died
P&S XXX..... chapter # of enacted private & special law
PUBLIC XXX.....chapter # of enacted public Law
RESOLVE XXX..... chapter # of finally passed resolve
VETO SUSTAINED..... Legislature failed to override Governor's veto

The effective date for non-emergency legislation enacted in the First Regular Session of the 126th Legislature is October 9, 2013. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

Joint Standing Committee on Health and Human Services

LD 145 **Resolve, Regarding the Presence of the Department of Health and Human Services in Urban and Rural Areas**

RESOLVE 23

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
FREDETTE KATZ	OTP-AM	H-70

This bill requires the Department of Health and Human Services to establish in each county of the State at least one office with appropriate staff to provide child protective services.

Committee Amendment "A" (H-70)

This amendment replaces the bill with a resolve and changes the title. The amendment directs the Department of Health and Human Services to review the distribution of offices of the department and the means by which the department provides necessary departmental presence and staffing to residents of the State in urban and rural areas. The amendment directs the department to consider the needs of all residents, both young and old, and the reasons residents are visiting the department. The amendment directs the department to consider traditional office-based services, part-time and donated office space, delivery of services by mobile means and by having personnel visit with residents in their homes and new options created by advancements in technology. The amendment directs the department to report by January 1, 2014 to the Joint Standing Committee on Health and Human Services on the results of the review and the options for and costs of improved service delivery. The report must include the costs and benefits of several options and the recommendations of the department.

Enacted Law Summary

Resolve 2013, chapter 23 directs the Department of Health and Human Services to review the distribution of offices of the department and the means by which the department provides necessary departmental presence and staffing to residents of the State in urban and rural areas. The resolve directs the department to consider the needs of all residents, both young and old, and the reasons residents are visiting the department. The resolve directs the department to consider traditional office-based services, part-time and donated office space, delivery of services by mobile means and by having personnel visit with residents in their homes and new options created by advancements in technology. The resolve directs the department to report by January 1, 2014 to the Joint Standing Committee on Health and Human Services on the results of the review and the options for and costs of improved service delivery. The report must include the costs and benefits of several options and the recommendations of the department.

LD 162 **An Act To Repeal the Maine Certificate of Need Act of 2002**

**ACCEPTED
MAJORITY
(ONTP) REPORT**

<u>Sponsor(s)</u>	<u>Committee Report</u>	<u>Amendments Adopted</u>
MALABY CUSHING	ONTP OTP-AM	

Under current law, before introducing additional health care services and procedures in a market area, a person must apply for and receive a certificate of need from the Department of Health and Human Services. This bill eliminates that requirement.

Committee Amendment "A" (H-366)

This amendment is the minority report of the committee. This amendment establishes a prior approval process for health care facility projects that will require funding from or will increase costs to the MaineCare program. "Health care facility" is defined as a hospital, psychiatric hospital, nursing facility, intermediate care facility for persons